

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>LE</i>	#67133	3-15-99

INDEX OF CLAIMS

Rejected ..... N ..... Non-elected  
 Allowed ..... I ..... Interference  
 (Through numeral) Canceled ..... A ..... Appeal  
 Restricted ..... O ..... Objected

*201-01m*

Claim	Final	Original	Date
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